SEP 09 2016

FILE NO. 2121533-1

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

ARTICLES OF INCORPORATION FOR-PROFIT or PROFESSIONAL CORPORATION

	Read the Instructions <u>C010i</u>					
1.	ENTITY TYPE - check only one to indicate the type of entity being formed: FOR-PROFIT (BUSINESS) CORPORATION PROFESSIONAL CORPORATION					
2.	ENTITY NAME – <u>see Instructions C010i</u> for naming requirements – give the exact name of the corporation:					
	A Choice Services & Sales Inc.					
3.	PROFESSIONAL CORPORATION SERVICES — if professional corporation is checked in number 1, briefly describe the professional service or services that the professional corporation will provide (examples: law firm, accounting, medical):					
4.	CHARACTER OF BUSINESS — briefly describe the character of business the corporation initially intends to conduct in Arizona. NOTE that the character of business that the corporation ultimately conducts is not limited by the description provided.					
	water purification equipment					
5.	SHARES – <u>see Instructions C010i</u> – list the class (common, preferred, etc.) and total number of shares of each class that the corporation is AUTHORIZED to issue – the total must be greater than zero. If more space is needed, check this box \square and complete and attach the <u>Shares Authorized Attachment</u> form C087. <i>Note</i> – Par Value is optional.					
	Class: Common Series: Total: 1,000,000 Par Value:					
	Class: Series: Total: Par Value:					
6.	ARIZONA KNOWN PLACE OF BUSINESS ADDRESS: 6.1 Is the Arizona known place of business address the same as the street address of the statutory agent? Yes - go to number 7 and continue No - go to number 6.2 and continue 6.2 If you answered "No" to number 6.1, give the physical or street address (not a P.O. Box) of the known place of business of the corporation in Arizona: Attention (optional) Address 1 Address 2 (optional) City State or Zip					
	State or Zip Province					

Attachment form C082.			1113 500			acacii cii	<u>Director</u>
Gilbert B. Lara Jr.							
Name 2347 W. Morten Ave.		-	Name				
Address 1			Address 1				
Address 2 (optional)	T		Address 2	(optional)		T	
Phoenix	AZ	85021		•			
Country UNITED STATES	State or Province	Zĺp	Country		•	State or Province	Zip
Name			Name				<u></u>
Address 1			Address 1		-		
Address 2 (optional)			Address 2 ((optional)			
Country UNITED STATES	State or Province	Zip	City		$\overline{\mathbf{Y}}$	State or Province	Zip
Name			Name				
Address 1			Address 1				-··
Address 2 (optional)		<u> </u>	Address 2 (optional)			
City	State or Province	Zip	City		•	State or Province	Ztp
8. STATUTORY AGENT	- <u>see Instr</u>	uctions C01	! <i>0i</i> :				
8.1 REQUIRED - give			8	3.2 OPTIONA	L – mail	ing address	in Arizona
an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:			8.2 OPTIONAL – mailing address in Arizona of statutory agent (can be a P.O. Box):				
Gilbert B. Lara Jr.				·	-		
Statutory Agent Name (required)			-				

7. DIRECTORS - list the name and business address of each and every Director of the

8.3 REQUIRED - the <u>Statutory Agent Acceptance</u> form M002 must be submitted along with these Articles of Incorporation.

Attention (optional)

Address 2 (optional)

Attention (optional)

Address 2 (optional)

City Phoenix

Address 1

2347 W. Morten Ave.

ΑZ

85021

Zip

State

		Attachment form C084.
Gilbert B. Lara Jr.		
Name 2347 W. Morten Ave.		Name
Address 1		Address 1
Address 2 (optional)	17 0500	Address 2 (optional)
Phoenix	AZ 85021	City State Zip
UNITED STATES	State Lip	City State Zip
Country		Country
SIGNATURE - see Instruct	tions C010i;	SIGNATURE - see Instructions C010i:
under penalty of perjury the	d "I accept" below, I acknowledge at this document together with ed in compliance with Arizona law.	By checking the box marked "I accept" below, I acknowledge under penalty of perjury that this document together with any attachments is submitted in compliance with Arizona law.
Signature B.		I ACCEPT
Gilbert B. Lara Jr.	09/08/2016	
	Date	Printed Name Date
Corporation as Inc	, CHECK ONE, FILL IN BLANK: CORPORATOR - I am signing as an agent of a corporation and its	IF SIGNING FOR AN ENTITY, CHECK ONE, FILL IN BLANK: Corporation as Incorporator - I am signing as an officer or authorized agent of a corporation and its name is:
LLC as Incorporate manager, or authorit company, and its r	or - I am signing as a member, zed agent of a limited liability name is:	LLC as Incorporator - I am signing as a member, manager, or authorized agent of a limited liability company, and its name is:

REQUIRED - you must complete and submit with the Articles a <u>Certificate of Disclosure</u>. The Articles will be rejected if the Certificate of Disclosure is not simultaneously submitted.

Please be advised that A.C.C. forms reflect only the **minimum** provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

All documents filed with the Arizona Corporation Commission are **public record** and are open for public inspection.

If you have questions after reading the Instructions, please call 602-542-3026 or (within Arizona only) 800-345-5819.

9.

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY. STATUTORY AGENT ACCEPTANCE Please read Instructions M002i 1. ENTITY NAME - give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation): A Choice Services & Sales Inc. 2. STATUTORY AGENT NAME - give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be either an individual or an entity). NOTE - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix: Gilbert B. Lara Jr. 3. STATUTORY AGENT SIGNATURE: By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first. The person signing below declares and certifies under penalty of perjury that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law. ellat B. Law Que Gilbert B. Lara Jr. 09/08/2016 Printed Name Date **REQUIRED** - check only one: Individual as statutory agent: I am Entity as statutory agent: I am signing on signing on behalf of myself as the individual behalf of the entity named as statutory agent. (natural person) named as statutory agent. and I am authorized to act for that entity.

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.

Mail:

Fax:

602-542-4100

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Filing Fee: none (regular processing)

Expedited processing - not applicable.

All fees are nonrefundable - see Instructions.

Arizona Corporation Commission - Corporate Filings Section

1300 W. Washington St., Phoenix, Arizona 85007

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CERTIFICATE OF DISCLOSURE

Read the Instructions C003i

1.	ENTITY NAME – give the exact name of the corporation in Arizona:							
	A Choice Services & Sales Inc.							
	Find the A	FILE NUMBER (if already incorporated or registered in AZ): C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcconflyone.org only one of the following to indicate the type of Certificate:	gov/Divisians/Co	orporations				
		Initial (accompanies formation or registration documents)						
		Annual (credit unions and loan companies only)						
		Supplemental to COD filed (supplements a previo	usly-filed					
		Certificate of Disclosure)						
4.	FELON	//JUDGMENT QUESTIONS:						
	control	y person (a) who is currently an officer, director, trustee, or incorpo is or holds over ten per cent of the issued and outstanding common fany other proprietary, beneficial or membership interest in the cor	shares or te	en per				
	4.1	Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the five-year period immediately preceding the signing of this certificate?	☐ Yes	■ No				
	4.2	Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the five-year period immediately preceding the signing of this certificate?	☐ Yes	■ No				
	4.3	Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the five-year period immediately preceding the signing of this certificate, involving any of the following:						
		 a. The violation of fraud or registration provisions of the securities laws of that jurisdiction; b. The violation of the consumer fraud laws of that jurisdiction; c. The violation of the antitrust or restraint of trade laws of that jurisdiction? 	☐ Yes	■ No				
	4.4	If any of the answers to numbers 4.1, 4.2, or 4.3 are YES, you MU		e				
		and attach a Certificate of Disclosure Felony/Judgment Attachment for	m CUU4.					

5. BANKRUPTCY QUEST					
incorporator, or the issued and any other propr corporation, ser cent interest in	(b) who controls or outstanding common ietary, beneficial or over the capa any other corporates.	an officer, director, trustee, holds over twenty per cent of shares or twenty per cent of membership interest in the acity or held a twenty per tion (not the one filing this ceivership of the other			
5.2 If the answer to number 5.1 is YES, you MUST complete and attach a Certification Disclosure Bankruptcy Attachment form C005.					
Certificate becomes an officer, dir outstanding shares or ten per cen	ector, trustee or person c it of any other proprietary EMENTAL Certificate provi	s Certificate to the A.C.C. any person not included in this ontrolling or holding over ten per cent of the issued and , beneficial or membership interest in the corporation, the ding information about that person, signed by all incorporators or			
SIGNATURE REQUIREMENTS:					
Initial Certificate of Disclosure:	complete and attach	t be signed by all incorporators. If more space is needed, an incorporator Attachment form C084.			
Foreign corporations:	the Board of Directo				
Credit Unions and Loan Companie	S: This Certificate must	be signed by any 2 officers or directors.			
lbert B. Lara Jr.					
me		Name			
47 W. Morten Ave.		Address 1			
dress 2		Address 2			
oenix	AZ 85021				
UNITED STATES	State Zlp	City State Zip			
GNATURE - see Instructions CO	03i:	SIGNATURE - see Instructions C003i:			
y typing or entering my name and accept" below, I acknowledge und is document together with any attempliance with Arizona law.	der penalty of perjury tha	t "I accept" below. I acknowledge under penalty of periury that			
Bull B. Lan	cept a gr	☐ I ACCEPT			
ilbert B. Lara Jr.	09/08/2016	Signature			
QUIRED – check only one:	Date	Printed Name Date			
Incorporator - I am an inco- corporation submitting this C Officer - I am an officer of t submitting this Certificate Chairman of the Board of Chairman of the Board of Dir submitting this Certificate. Director - I am a Director of company submitting this Certificate.	Certificate. The corporation Directors - I am the rectors of the corporation of the credit union or loan	REQUIRED – check only one: Incorporator - I am an incorporator of the corporation submitting this Certificate. Officer - I am an officer of the corporation submitting this Certificate Chairman of the Board of Directors - I am the Chairman of the Board of Directors of the corporation submitting this Certificate. Director - I am a Director of the credit union or loan company submitting this Certificate.			
Filing Fee: None		Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007			
All fees are nonrefundable - see	instructions.	Fax: 602-542-4100			

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